

394000000454



ACCOUNT NO. : 072100000032

REFERENCE : 352962 5032822

AUTHORIZATION :

*Patricia Kyzut*

COST LIMIT : \$ 35.00

ORDER DATE : August 24, 1999

ORDER TIME : 3:17 PM

ORDER NO. : 352962-050

CUSTOMER NO: 5032822

100002972831--7

CUSTOMER: Ms. Cathy Kotowski  
Public Storage, Inc.  
701 Western Avenue

Glendale, CA 91201

CHANGE OF AGENT

NAME: STORAGE TRUST PROPERTIES, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

FILED  
STATE OF FLORIDA  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
99 AUG 27 AM 11:17

RECEIVED  
99 AUG 27 PM 3:56  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*MK*  
*8/27/99*

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Storage Trust Properties, L.P.  
Name of the limited partnership

2. November 8, 1994 Date of filing/registration in Florida  
3. B94000000454 Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT Corporation System  
Name  
1200 South Pine Island Road  
Address  
Plantation, FL 33324  
City, State and Zip

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5. The name and address of the new registered agent and/or office:

Corporation Service Company  
Name  
1201 Hays Street  
Florida street address (P.O. Box not acceptable)  
Tallahassee, FL 32301  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

M. Moffitt PS Texas Holdings, Ltd., General Partner  
Signature of General Partner By: PS GPT Properties, Inc., General Partner  
By: Michele Moffitt, Vice President

*I hereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

Corporation Service Company  
By: Vivien S. Mitchell  
Signature of Registered Agent  
Vivien S. Mitchell, Assistant Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00